Advisory Council on Aging and Disability Services

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Creating choices for elders and adults with disabilities in Seattle-King County

MONTHLY MEETING SEPTEMBER 9, 2005

MEMBERS PRESENT

CITY OF SEATTLE	KING COUNTY	UNITED WAY
▼ Thelma Coney	Lisa Yeager, Officer At	Martha Becker
✓ Joanne Brekke	☐ Helen Spencer	✓ Lorna Stone
Adam John	John Holecek	▼ Thelma Pegues
Alexandra Tu	John Barnett	▼ Timmie Faghin, Chair
▼ Tom Rasmussen	☐ Larry Verhei	Don Moreland
✓ Larry Low, Secretary	☐ Vacant	☐ Midge Levy
✓ Houston Brown	☐ Vacant	☐ Vacant
☑ Dr. Robert Gross	☐ Vacant	☐ Vacant
Candace Inagi	☐ Vacant	☐ Vacant

Excused Absence Midge Levy, Larry Verhei

Guests Art Mussman, Andy Niemer, Thelma Caplan, Pat Melgard

ADS Staff
Pamela Piering, Selina Chow, Rosemary Cunningham, Margaret Casey, Linda Wells, Karen

Winston, Marcy Kubbs

United Way Staff Linda Woodall

King County

Staff

MINUTES

Timmie Faghin, Chair convened the Advisory Council (AC) meeting at 12:05 p.m. and invited everyone attending to introduce themselves.

PROGRAM TOPIC: UNIVERSAL HEALTH CARE

Today's program featured two speakers who addressed the topic of Universal Health Care. They were **Karen Merriken**, **J.D**., Director of Health Policies Development at Group Health Cooperative, and **David Loud**, District Staff Assistant to Congressman Jim McDermott.

In association with the Area Agency on Aging for Seattle-King County and sponsored by:







Karen Merriken provided a PowerPoint presentation on Universal Health Care.

How Many are Uninsured?

Over 45 Million Americans are uninsured. This equals the population of California, Oregon and Washington combined. Of those under 65 years of age, statistics on how people receive health coverage include:

- o 32% Employers
- o 31% Dependent of Employee
- o 7% Individual
- o 2% Medicare (And not over 65 years of age)
- o 13% Medicaid
- o 3% Military

In Washington State 1in 10 individuals lack health insurance coverage (9.4% in 2002 vs. 11% in 2004). Of those, two thirds are under 200% of the Federal Poverty Level and more than 70% are part of working families. The uninsured are often self-employed or working for a small company. They are also more likely to be young and living in a rural area, or employed in service, agricultural, retail, or construction work. While the large majority of uninsured are white, minorities are more likely to be uninsured.

Why Coverage & Costs Matter

Uninsured adults are:

- Less likely to receive recommended preventive care
- Less likely to have chronic disease adequately treated & controlled
- More likely to die (20% increased mortality risk)

Uninsured children are:

- Less likely to have a regular doctor
- More likely to be hospitalized
- Less likely to receive prenatal care
- More likely to have poor outcomes at birth

Communities with low insurance coverage have:

- Poorer access to hospital, emergency and specialty services
- Increased tax burden to support public hospitals and clinics

Declining access to health insurance contributes directly to the uncontrolled inflation in health care costs. They are two sides of the same coin. Health care costs exceed other social expenditures as indicated below.

Health Care in 2002	15%
Social Security, Disability & Private Pensions	10%
Education K- Post Secondary, Public & Private	16%
Military	3%
Food Stamps, Housing Assistance, AFDC/TANF, Earned Income Tax Credit	2%

U.S. health care costs are higher than any other industrialized country. The main drivers are, in order from higher to lower costs: hospital, administrative, physician and drug costs. U.S. per capita health costs are \$2350 higher than in Europe. By category, this difference is:

Hospital Costs	\$950	
Administrative costs	\$600	
Physician Costs	\$550	
Drug Costs	\$200	

Options for controlling rising health care costs include such measures as:

- Improving quality and efficiency of medical care & rewarding it financially
- Reducing use of new technologies / procedures that provide no added benefit
- Providing care management for high risk patients
- Instituting cost-sharing to reduce unnecessary service use
- Standardizing & automating claims processing to lower administrative costs
- Using evidence-based formularies & increase competition in drug purchasing

Group Health Cooperative believes Universal Health Care should:

- Provide universal and continuous coverage
- Provide access to care that is...
 - o Effective & efficient
 - o Safe, timely, equitable
 - o Patient-centered
- Be affordable and sustainable for individuals and society

Group Health Cooperative recently joined the National Coalition on Health Care, a bi-partisan organization. An evaluation of various reform proposals conducted by Ken Thorpe is available on their website at www.NCHC.org.

David Loud, Staff Assistant to Congressman Jim McDermott provided information on legislative proposals dealing with Universal Health Care. He indicated that Americans pay more per capita for health care than any other country in the world, but have less to show for it. The U.S. for example has per capita: fewer doctors, fewer hospitals, lower life expectancy, and lower rates of child immunizations than other industrialized countries. Much of the high cost is related to administrative paperwork. The U.S. spends \$1000 per capita per year on health care administrative paperwork compared to Canada that spends only \$300 per capita per year.

Labor unions fought for and won health care benefits for American workers yet these benefits are crumbling. In 2004 less than 60% of individuals are covered through their job. Health care benefits are now the primary issue in labor disputes.

Congressman McDermott has repeatedly submitted for action HR 1200, American Health Security Act that would establish a single payer – the federal government - but provide freedom of provider choice. In 1993 this bill was evaluated by the Congressional Budget Office and found at that time, to be the only proposal that would cover everyone in the U.S. and save

money. It is estimated that it could save up to \$200 billion in administrative healthcare costs. While it had 50 co-sponsors in 2005, in the current political climate it has no chance of passing.

Universal health care is a social justice issue. Our country's attitude has drifted away from, "We can do better together" to, "I can do better taking care of myself". It may take significant effort to move back in the other direction. David Loud wonders if the devastation brought to our country by Hurricane Katrina will provide the impetus to bring us together on this issue.

BUSINESS MEETING

Action Taken: It was moved/seconded and passed that the August 12, 2005 minutes be approved.

COMMITTEE AND TASK FORCE REPORTS

Seattle City Council

Tom Rasmussen reported on two topics today. They were:

Advisory Ballot Measure

Councilmember Rasmussen is co-sponsoring an advisory ballot measure in the upcoming November election on Universal Health Care. Universal Health Care has historically been a controversial topic. Placing this issue on the ballot will raise its visibility, help educate the community, and strengthen the political will to move forward on this important issue. The cost, \$18,000-\$20,000, is inexpensive because there are other City measures on the ballot.

Town Hall Forum on Elder Abuse

On Wednesday, September 14th, Councilmembers Rasmussen and Della are hosting a Town Hall meeting on Elder and Vulnerable Adult Abuse. The Advisory Council and King County Elder Abuse Council are co-sponsors of the event. It will be televised live on Seattle Channel 21, and the public will be able to call in questions. Councilmember Rasmussen is hopeful this will increase public awareness of the topic, increase reporting of abuse and neglect, and increase resources in the Police Department dedicated to investigating these crimes.

Planning and Allocation Committee

Thelma Coney reported that the Mayor Nickels did not cut CDBG funds as had been anticipated. In light of the availability of these funds, the Planning and Allocations Committee reviewed ADS's four funding priorities and recommended funding the top two. These are:

- Raising reimbursement for gas for volunteer drivers providing transportation to food sites
- Providing an inflationary adjustment of .087% to subcontracting agencies this year

The committee recommended ADS reduce the amount of money in its reserves to fund these two priorities. The Sponsors will review this action at their upcoming meeting.

Outreach and Advocacy Committee and Health Care Task Force

Martha Becker reported there was a joint committee meeting this month. Members discussed a number of items including:

- Peter Greenfield of Columbia Legal Services provided an overview of the Public Guardianship Task Force work done by the Elder Law Section of the Washington State Bar Association. The Bar Association plans to have a legislative packet developed by the 2007 Legislative Session on the need for a public guardianship pilot program. No advocacy action is needed on this issue at this time.
- The Medicare Prescription Drug Plan is advertising the need for volunteers to help spread the word about this benefit.
- This year's Senior Lobby Conference, "Critical Issues for an Aging Society" will take place on Friday, October 21, 2005 from 9:00 a.m. to 3:45 p.m. at the Hilton Seattle Airport & Conference Center, 17620 Pacific Highway South in SeaTac.
- Recognizing the need for active advocacy for the increasing number of people living below the federal income poverty level, the joint committees asked that the Advisory Council direct the committees to focus coming meeting agendas on a re-examination of the social services network for all in the country. Emphasis would be on the Food Stamp, Medicaid, Medicare, and Energy Assistance programs, and the provision of medical care for people in all settings. The Health Care Task Force would focus on the above, as well as the need for a public guardianship program in the State of Washington.

Action Taken: It was moved / seconded and passed that the Advisory Council direct the Outreach and Advocacy Committee and Health Care Task Force to focus the coming meetings on a re-examination of the social services network in the country.

Communications Committee

Timmie Faghin indicated the September issue of Seniors Digest is out. She encouraged anyone with ideas for future issues to share them with the committee.

State Council on Aging

Joanne Brekke indicated the State Council on Aging has taken the summer off. Their next meeting will be on September 28, 2005.

NEW BUSINESS

Nominating Committee

Larry Low reported that the nominating committee met and proposed the following slate of officers for the Advisory Council for the coming year:

- Don Moreland, Chair
- Houston Brown, Vice-Chair
- Midge Levy, Secretary
- Thelma Pegues, Member-at-Large

Retreat Committee

Timmie Faghin reported that the members of this year's Retreat Committee are: Don Moreland, Chair, Dr. Robert Gross, Lisa Yeager, and Thelma Pegues. Larry Low and Larry Verhei have volunteered to organize a White Elephant sale again this year. The Retreat Committee will hold its first meeting on Friday, September 23rd at 10:30 am. The location of the meeting is yet to be determined.

Healthy Aging Partnership

The second **Healthy Aging Partnership** workshop which had been scheduled to take place on September 20, 2005 at the Yesler Neighborhood Center has been postponed.

Aging in Place Resource Fair

It was announced that the 2005 Aging in Place Resource Fair will take place on November 12th, from 10:00 a.m. - 3:00 p.m. at the Seattle Center House. As last year, there will be a variety of workshops and vender booths providing information on how to adapt your home so you can remain there as you age.

John Barnett reported that AARP's 2004 Annual Report was recently released. It has information on topics of interest to the Advisory Council such as fighting fraud and lower prescription drug prices.

Director's Report

Pamela Piering reported on a number of items to the Advisory Council.

- 1) A proposal to host a gathering of Advisory Council members from across the state on October 20th, from noon 2:30 p.m., the day before the Senior Lobby Conference, will be discussed with the Executive Committee later today. It is anticipated 25-30 members would attend the event. The meeting would provide time for informal networking of members and for affinity groups to meet.
- 2) If evacuees displaced by Hurricane Katrina come to Washington, DSHS will conduct the intake. It is possible ADS would be involved with those individuals who might plan to stay in the state long-term, but currently it appears no one is coming.
- 3) Request-For-Proposal processes have been conducted this year for two program areas: Family Caregivers and Special Information and Assistance. Pam thanked Advisory Council members for their assistance in selecting agencies to receive funding to provide these services.
- 4) Philanthropy Northwest has provided funding for a survey of the philanthropic community including World Health Organization and United Way to learn more about who is giving. Pam will also be involved in an educational forum raising the community's awareness of aging issues to encourage foundations to provide more funding in this area.
- 5) On October 29, 2005 the University of Washington, Aging Institute will sponsor a gerontechnology seminar titled, "The Role of Intelligent Technology in Eldercare".

Timmie shared a plaque that will be presented to Gabe Cohen thanking him for his years of volunteer service while serving on the Advisory Council. Larry Low reported that Gabe is still convalescing at the Kline Galland Nursing Home.

The meeting was adjourned at 2:00 p.m.

Note: This is the 3rd Friday in November!

NEXT MEETING

Friday, November 18, 2005 12:00 – 2:00 p.m. 13th Floor Conference Room Alaska Building 618 Second Ave, Seattle, WA 98104 www.adsadvisorycouncil.org

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